

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	300	4-26-94
TYPIST	284	12-1
VERIFIER	20	12-1
CORPS CORR.		
SPEC. HAND	51	11-05-94
FILE MAINT.	452	5-2-94
DRAFTING		

Best Available Copy

INDEX OF CLAIMS

Claim	Date
Final	Original
1	2
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SYMBOLS
✓ Rejected
- Allowed
- (Through numeral) Canceled
+ Restricted
N Non-elected
I Interference
A Appeal
O Objected

Claim	Date
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